

Work Order ID 95680

Wednesday, January 16, 2013 2:33:02 PM

95680

Page 1

Item ID: D350-616-011

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Emergency Litter

Stop ***NS2***

Start Date: 1/16/2013 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/24/2013 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan: *CMF*Date: *13-1-16* Tooling:

Date:

Run Start ***NR1***

QC:

Date: SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

Draw Nbr

Revision Nbr

d350-616

E

100

100

DC

Document Control

Memo

Photocopy bluefile and create labels per PPP D350-616-011
CHG004

0.00

0.00

110

Pick Kit

0.00

110

Packaging

Packaging

Memo

0.00

120

QC4- 100% Inspect kits for completeness

0.00

120

QC

Quality Control

Memo

0.00

SPDAS*
15
*13-1-16**MCJ 13-02-06**1**[Signature]**DAS*
06
*13-1-16**1x**13-02-05**1**DAS*
15
13-1-16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 95680***95680***

Page 2

Wednesday, January 16, 2013 2:33:02 PM

Item ID: D350-616-011

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Emergency Litter

Stop ***NS2***

Start Date: 1/16/2013 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/24/2013 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

0.00

130

Packaging

Memo

0.00

Packaging

Identify and pack for shipping as per PPP D350-616-011

Location:

PPP Rev: SHIP8 13/2/6

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

MC 1302-06MC13-2-06

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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QA Closed: _____ Date: _____

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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
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Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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Picklist Print

Wednesday, January 16, 2013 2:33:01 PM

Page 1

Work Order ID: 95680

Parent Item: D350-616-011

Parent Item Name: Emergency Litter

Start Date: 1/16/2013

Required Date: 1/24/2013

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP E03.04.04ReformatKJ/RF
IPP Rev:F 08-12-10 rev.E as per dwg DD verified by:ec

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2370 Litter Assembly		Manufactured	No				Each	7.0000					

3189803 SP

Sm

Location	Loc Qty	Loc Code
ST201	1	
90622	1	
ST224	6	
89803	2	
90282	1	
92646	2	
94397	1	

D2493
Patient Stop Assembly

Sm

Manufactured No Each 1.0000

Location	Loc Qty	Loc Code
ST221	1	
89411	1	

374803 SP

D350-616-013
Deck Plate and Tie Down

Sm

Manufactured No Each 2.0000

Location	Loc Qty	Loc Code
FG023	2	
90830	2	

375778 SP
95 970 13/16

NCR: Yes / No

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